Department of Transportation—federal Aviation Administration

Supplemental Type Certificate

Number SA3247SW-D

This certificate, issued to

Century Flight Systems, Inc.

F.M. 1195

P. O. Box 610

Mineral Wells, TX 76067

certifies that the change in the type design for the following product with the limitations and conditions

therefor as specified hereon meets the airworthiness requirements of Part 3 of the Civil Air

Regulations.

Original Product - Type Certificate Number: 148

Make: Helio

Model: H-250, H-295, H-395, H-395A

Description of Type Design Change:

Installation of Mitchell Automatic Flight System Model AK618 consisting of a Century IIB Autopilot with Optional Radio Coupler according to Bulletin No. 744, dated 8-29-77 and Master Drawing List No. 87A963, dated 8-29-77 (14 Volt or later FAA approved revision.

Limitations and Conditions Eligible only on Helio Model H-295, S/N 1457 and Below. Also eligible on Helio Model H-295, S/N 1457 and below when modified in accordance with STC SAl56SO (Turbocharged Engine) and Helio Model H-395 when modified in accordance with STC SA125SO (Turbocharged Engine).

FAA/DAS Approved Airplane Flight Manual Supplement, P/N 688590, dated 9-29-77 is required.

Compatibility of this modification with other previously approved modifications must be determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until sur-

rendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the

Federal Aviation Administration.

Date of application: 9-6-77

Date of issuance: 9-29-77

Sale reissued: 3-28-84 Revision 1

Tale amended :

Don P. Watson

Manager, Aircraft Certification Division

Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

he FAA will reissue the o	ertificate in the name of the transferee and forward it to him.
	TRANSFER ENDORSEMENT
ransfer the ownershi	o of Supplemental Type Certificate Number
(Name of transferee)	
Address of transferee) _	(Number and street)
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	(City, State, and ZIP code)
rom (Name of grantor)	(City. State, and ZIP code) (Print or type)
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Address of grantor)	(City, State, and ZIP code)
Address of grantor)	(Print or type)
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Address of grantor)	(City, State, and ZIP code)
Address of grantor) Extent of Authority	(City, State, and ZIP code)